

Express Mail No.: EL988726713US

Date Deposited: 03/15/2004

 PTO/SB/06 (08-00)  
 Approved for use through 10/31/2002. OMB 0651-0032  
 U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD						Application or Docket Number 1675.004	
CLAIMS AS FILED - PART I						SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)		(Column 4)	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE	RATE	FEE	OR
BASIC FEE (37 CFR 1.16(a))				\$ 385		\$ 0	OR
TOTAL CLAIMS (37 CFR 1.16(c))	23	minus 20 = * 3	x \$ 9 =	27	x \$ 18 =	0	OR
INDEPENDENT CLAIMS (37 CFR 1.16(b))	5	minus 3 = * 2	x 43 =	86	x 86 =	0	OR
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ 140 =	0	+ 280 =	0	OR
			TOTAL	498	TOTAL	0	OR
* If the difference in column 1 is less than zero, enter "0" in column 2							
CLAIMS AS AMENDED - PART II						SMALL ENTITY OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)		(Column 4)	
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	** 20	x \$ 9 =	0	x \$ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	*** 3	x 43 =	0	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	TOTAL	0
(Column 1) (Column 2) (Column 3) ADDIT. FEE							
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	x \$ 9 =	0	x \$ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	x 43 =	0	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	TOTAL	0
(Column 1) (Column 2) (Column 3) ADDIT. FEE							
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI-TIONAL FEE	RATE	ADDI-TIONAL FEE
Total (37 CFR 1.16(c))	*	Minus	**	x \$ 9 =	0	x \$ 18 =	0
Independent (37 CFR 1.16(b))	*	Minus	***	x 43 =	0	x 86 =	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				+ 140 =	0	+ 280 =	0
				TOTAL	0	TOTAL	0
(Column 1) (Column 2) (Column 3) ADDIT. FEE							
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.							

 SEND TO: Commissioner For Patents, PO Box 1450  
 Alexandria, VA 22313-1450